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TO: OFFICE OF PETITIONS**From: DAVID WEITZ, REG. NO. 38,362****FAX NUMBER: (703) 308-6916****DATE: OCTOBER 17, 2003****COMPANY: U.S. PATENT AND TRADEMARK
OFFICE****TOTAL NO. OF PAGES INCLUDING COVER: 5****PHONE NUMBER:****SENDER'S PHONE NUMBER:****(858) 731-3508****RE: PETITION FOR WITHDRAWAL OF
TERMINAL DISCLAIMER****SENDER'S FAX NUMBER:****(858) 550-0992**

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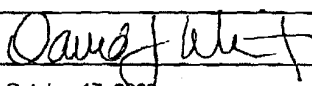
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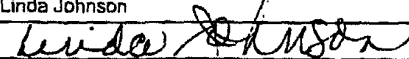
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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/060,922	
	Filing Date	January 29, 2002	
	First Named Inventor	David, Peter	
	Art Unit	1765	
	Examiner Name	Robert M. Kunemund	
Total Number of Pages in This Submission	4	Attorney Docket Number	SYRTECH-5002-C9

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input checked="" type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input checked="" type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks: The Commissioner is authorized to charge Deposit Account 50-2256 the required fee of \$130.00 for filing the attached Petition and \$55.00 for filing the attached Terminal Disclaimer. The Commissioner is also authorized to charge any additional fees that may be required by the filing of this paper.		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual	David J. Weitz, Reg. No. 38,362 Syrrx, Inc.
Signature	
Date	October 17, 2003

CERTIFICATE OF FACSIMILE TRANSMISSION			
I hereby certify that this correspondence (along with any referred to as being attached or enclosed) is being sent to the Commissioner for Patents via facsimile transmission to (703) 308-6916 on the date listed below:			
			October 17, 2003
Type or printed	Linda Johnson		
Signature		Date	October 17, 2003

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Washington, DC 20231.

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